

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AV	644861	7/5
O.I.P.E. CLASSIFIER	Eli		7/10/00
FORMALITY REVIEW	PF	29	08/15/00
RESPONSE FORMALITY REVIEW	2/24	59667	9/30/00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
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